| (IP) | | PART B | - FEE(S) | TRA | NSMITTAL | <u>.</u> | | |
|---|--|--|-----------------------------|--|---|--|--|--|
| Complete and send to | his orm, together w | pplicable fo | ee(s), to: <u>N</u> or] | | Mail Stop ISSI Commissioner for P.O. Box 1450 Alexandria, Virg (703) 746-4000 | or Patents | <i>(</i> | |
| INSTRUCTIONS: This for appropriate. As a ruler condition indicated unless contained maintenance fee notification | rm thould be used for transpondence including the felow or directed otherwise as. | smitting the ISSU Patent, advance or in Block 1, by (a | | | | ired). Blocks I through 5 s will be mailed to the current ; and/or (b) indicating a sepa | hould be completed where correspondence address as arate "FEE ADDRESS" for | |
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address) 39207 7590 06/28/2005 | | | | | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. | | | |
| SACCO & ASSOCIATES, PA P.O. BOX 30999 PALM BEACH GARDENS, FL 33420-0999 07/22/2005 WABDELR3 00000074 10694469 | | | | | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. | | | |
| 4 400 00 በበ | | | | | Robert J | . Sacco | (Depositor's name) | |
| 01 FC:1501 02 FC:1504 | 300 | .00 DP | | | | 2 | (Signature) | |
| 03 FC:8001 | • |).00 OP | | | 7-15- | 05 | (Date) | |
| APPLICATION NO. | FILING DATE | FIRST NAMED INVE | | | TOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | |
| 10/694,469 | 10/27/2003 | Jay A. Kralove | | | | 7162-95 | 2498 | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FI | EE | PU | JBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | NO NO | \$1400 | | | \$300 | \$1700 | 09/28/2005 | |
| | | | | | | ייי | 07/20/2000 | |
| EXAMINER | | ART UNIT | | CI | LASS-SUBCLASS | J | | |
| CHEN, SHIH CHAO 2821 | | | | | 343-7810CA | | | |
| 1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. | 2. For printing on the patent front page, list SACCO & ASSOCIATES, PA (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | | | |
| 3. ASSIGNEE NAME AND | RESIDENCE DATA TO E | E PRINTED ON T | HE PATENT | Γ (print o | or type) | | | |
| PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. | | | | | | | | |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | | | |
| HARRIS CO | RPORATION | | MELBO | URNE | | | _ | |
| | assignee category or category | | | | Individual XX C | orporation or other private gr | oup entity Government | |
| 4a. The following fee(s) are X Issue Fee | b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. | | | | | | | |
| | | | | Payment by credit card. Form PTO-2038 is attached. | | | | |
| Advance Order - # or | The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2884 (enclose an extra copy of this form). | | | | | | | |
| | (from status indicated above MALL ENTITY status. See | • | b. Applic | cant is no | o longer claiming SMA | LL ENTITY status. See 37 C | FR 1.27(g)(2). | |
| | | | | | | ly naid issue fee to the annlic | | |

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Robert J. Sacco

Registration No. 35,667

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.